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CONFIRMATION NO. 31

Bib Data Sheet

SERIAL NUMBER 10/663,880	FILING DATE 09/16/2003 RULE	CLASS 370	GROUP ART UNIT 2666	ATTORNEY DOCKE NO. 10971265-3
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APPLICANTS

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SH

YES

** CONTINUING DATA *****

This application is a CON of 09/510,278 02/21/2000 PAT 6,707,831

SH

NONE

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/10/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CO	SHEETS DRAWING 4	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>S. HEM</u> Initials _____				

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TITLE

Mechanism for data forwarding

FILING FEE RECEIVED 750	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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